

DO NOT MARK THIS COLUMN	Line No.	Print names in this order	1. WHAT IS THE NAME OF EACH PERSON who was living here on Wednesday, April 1, 1970 or who was staying or visiting here and had no other home?		2. HOW IS EACH PERSON RELATED TO THE HEAD OF THIS HOUSEHOLD? Fill one circle. If "Other relative of head," also give exact relationship, for example, mother-in-law, brother, niece, grandson, etc.		3. SEX • [] Fill one circle	4. COLOR OR RACE [] [] • Fill one circle. If "Indian (American)," also give tribe. If "Other," also give race.			DATE OF BIRTH			8. WHAT IS EACH PERSON'S MARITAL STATUS? Fill one circle			
			First name	Middle initial	Last name	Head of household Wife of head Unmarried children, oldest first Married children and their families Other relatives of the head Persons not related to the head		Roomer, boarder, lodger Patient or inmate Other not related to head—Print exact relationship	Male ○ Female ○	White ○ Japanese ○ Chinese ○ Negro or Black ○ Indian (Amer.) Print tribe →	Japanese ○ Hawaiian ○ Korean ○ Other—Print race	Month _____ Year _____ Age _____	Jan.-Mar. ○ 186- ○ 187- ○ 188- ○ 189- ○ 190- ○ 191-		Apr.-June ○ 192- ○ 193- ○ 194- ○ 195- ○ 196- ○ 197-	July-Sept. ○ 0 0 ○ 1 1 ○ 2 2 ○ 3 3 ○ 4 4 ○ 5 5 ○ 6 6 ○ 7 7 ○ 8 8 ○ 9 9	
○	①		First name	Middle initial	Last name	Head of household Wife of head Son or daughter of head Other relative of head—Print exact relationship	Roomer, boarder, lodger Patient or inmate Other not related to head—Print exact relationship	Male ○ Female ○	White ○ Japanese ○ Chinese ○ Negro or Black ○ Indian (Amer.) Print tribe →	Month _____ Year _____ Age _____	Jan.-Mar. ○ 186- ○ 187- ○ 188- ○ 189- ○ 190- ○ 191-	Apr.-June ○ 192- ○ 193- ○ 194- ○ 195- ○ 196- ○ 197-	July-Sept. ○ 0 0 ○ 1 1 ○ 2 2 ○ 3 3 ○ 4 4 ○ 5 5 ○ 6 6 ○ 7 7 ○ 8 8 ○ 9 9	Now married ○ Widowed ○ Divorced ○ Separated ○ Never married			
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9. If you used all 8 lines—Are there any other persons in this household? <input type="radio"/> Yes <input type="radio"/> No			10. Did you leave anyone out of Question 1 because you were not sure if he should be listed—for example, a new baby still in the hospital, or a lodger who also has another home? <input type="radio"/> Yes <input type="radio"/> No			11. Did you list anyone in Question 1 who is away from home now—for example, on a vacation or in a hospital? <input type="radio"/> Yes <input type="radio"/> No			12. Did anyone stay here on Tuesday, March 31, who is not already listed? <input type="radio"/> Yes <input type="radio"/> No			On back page, give name(s) and reason left out.					
Do not list the others; we will call to get the information.															On back page, give name(s) and reason person is away.		

The 15-percent and 5-percent forms contain a pair of facing pages for each person in the household (as listed on page 2). Shown on each pair of pages in the 15-percent form are the questions designated as 15-percent here on pages 6, 7, and 8. Shown on each pair of pages in the 5-percent form are the questions designated as 5-percent here on pages 6, 7, and 8.

Name of person on line ① of page 2																																														
15 and 5 percent 5 percent 15 percent 5 percent 15 percent 5 percent 15 percent	<p>Last name First name Initial</p> <p>13a. Where was this person born? If born in hospital, give State or country where mother lived. If born outside U.S., see instruction sheet; distinguish Northern Ireland from Ireland (Eire).</p> <p><input type="radio"/> This State OR (Name of State or foreign country; or Puerto Rico, Guam, etc.)</p> <p>b. Is this person's origin or descent— (Fill one circle)</p> <p><input type="radio"/> Mexican <input type="radio"/> Central or South American <input type="radio"/> Puerto Rican <input type="radio"/> Other Spanish <input type="radio"/> Cuban <input type="radio"/> No, none of these</p> <p>14. What country was his father born in?</p> <p><input type="radio"/> United States OR (Name of foreign country; or Puerto Rico, Guam, etc.)</p> <p>15. What country was his mother born in?</p> <p><input type="radio"/> United States OR (Name of foreign country; or Puerto Rico, Guam, etc.)</p> <p>16. For persons born in a foreign country—</p> <p>a. Is this person naturalized?</p> <p><input type="radio"/> Yes, naturalized <input checked="" type="checkbox"/> <input type="radio"/> No, alien <input type="radio"/> Born abroad of American parents</p> <p>b. When did he come to the United States to stay?</p> <table border="0"> <tr> <td><input type="radio"/> 1965 to 70</td> <td><input type="radio"/> 1950 to 54</td> <td><input type="radio"/> 1925 to 34</td> </tr> <tr> <td><input type="radio"/> 1960 to 64</td> <td><input type="radio"/> 1945 to 49</td> <td><input type="radio"/> 1915 to 24</td> </tr> <tr> <td><input type="radio"/> 1955 to 59</td> <td><input type="radio"/> 1935 to 44</td> <td><input type="radio"/> Before 1915</td> </tr> </table> <p>17. What language, other than English, was spoken in this person's home when he was a child? Fill one circle.</p> <table border="0"> <tr> <td><input type="radio"/> Spanish <input checked="" type="checkbox"/></td> <td><input type="radio"/> Other— Specify _____</td> </tr> <tr> <td><input type="radio"/> French</td> <td><input type="radio"/> None, English only</td> </tr> <tr> <td><input type="radio"/> German</td> <td></td> </tr> </table> <p>18. When did this person move into this house (or apartment)? Fill circle for date of last move.</p> <table border="0"> <tr> <td><input type="radio"/> 1969 or 70</td> <td><input type="radio"/> 1965 or 66</td> <td><input type="radio"/> 1949 or earlier</td> </tr> <tr> <td><input type="radio"/> 1968</td> <td><input type="radio"/> 1960 to 64</td> <td><input type="radio"/> Always lived in</td> </tr> <tr> <td><input type="radio"/> 1967 <input checked="" type="checkbox"/></td> <td><input type="radio"/> 1950 to 59</td> <td>this house or apartment</td> </tr> </table> <p>19a. Did he live in this house on April 1, 1965? If in college or Armed Forces in April 1965, report place of residence there.</p> <p><input type="radio"/> Born April 1965 or later <input checked="" type="checkbox"/> Skip to 20 <input type="radio"/> Yes, this house <input type="radio"/> No, different house</p> <p>b. Where did he live on April 1, 1965?</p> <p>(1) State, foreign country, U.S. possession, etc. _____</p> <p>(2) County _____</p> <p>(3) Inside the limits of a city, town, village, etc.? <input type="radio"/> Yes <input type="radio"/> No</p> <p>(4) If "Yes," name of city, town, village, etc. _____</p>	<input type="radio"/> 1965 to 70	<input type="radio"/> 1950 to 54	<input type="radio"/> 1925 to 34	<input type="radio"/> 1960 to 64	<input type="radio"/> 1945 to 49	<input type="radio"/> 1915 to 24	<input type="radio"/> 1955 to 59	<input type="radio"/> 1935 to 44	<input type="radio"/> Before 1915	<input type="radio"/> Spanish <input checked="" type="checkbox"/>	<input type="radio"/> Other— Specify _____	<input type="radio"/> French	<input type="radio"/> None, English only	<input type="radio"/> German		<input type="radio"/> 1969 or 70	<input type="radio"/> 1965 or 66	<input type="radio"/> 1949 or earlier	<input type="radio"/> 1968	<input type="radio"/> 1960 to 64	<input type="radio"/> Always lived in	<input type="radio"/> 1967 <input checked="" type="checkbox"/>	<input type="radio"/> 1950 to 59	this house or apartment	<p>20. Since February 1, 1970, has this person attended regular school or college at any time? Count nursery school, kindergarten, and schooling which leads to an elementary school certificate, high school diploma, or college degree.</p> <p><input type="radio"/> No <input checked="" type="checkbox"/> <input type="radio"/> Yes, public <input type="radio"/> Yes, parochial <input type="radio"/> Yes, other private</p> <p>21. What is the highest grade (or year) of regular school he has ever attended? Fill one circle. If now attending, mark grade he is in.</p> <p><input type="radio"/> Never attended school— Skip to 23 <input type="radio"/> Nursery school <input type="radio"/> Kindergarten <input checked="" type="checkbox"/></p> <p>Elementary through high school (grade or year) 1 2 3 4 5 6 7 8 9 10 11 12 <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/></p> <p>College (academic year) 1 2 3 4 5 6 or more <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/></p> <p>22. Did he finish the highest grade (or year) he attended?</p> <p><input type="radio"/> Now attending this grade (or year) <input type="radio"/> Finished this grade (or year) <input type="radio"/> Did not finish this grade (or year)</p> <p>23. When was this person born?</p> <p><input type="radio"/> Born before April 1956— Please go on with questions 24 through 41. <input type="radio"/> Born April 1956 or later— Please omit questions 24 through 41 and go to the next page • <input checked="" type="checkbox"/></p> <p>24. If this person has ever been married—</p> <p>a. Has this person been married more than once?</p> <p><input type="radio"/> Once <input type="radio"/> More than once ↓ ↓</p> <p>b. When did he get married for the first time?</p> <table border="0"> <tr> <td>Month</td> <td>Year</td> <td>Month</td> <td>Year</td> </tr> </table> <p>c. If married more than once— Did the first marriage end because of the death of the husband (or wife)?</p> <p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="checkbox"/></p> <p>25. If this is a girl or a woman— How many babies has she ever had, not counting stillbirths? Do not count her stepchildren or children she has adopted.</p> <table border="0"> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> <td>7</td> <td>8</td> </tr> <tr> <td><input type="radio"/></td> </tr> </table> <p>9 10 11 12 or more None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/></p> <p>26. If this is a man—</p> <p>a. Has he ever served in the Army, Navy, or other Armed Forces of the United States?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>b. Was it during— (Fill the circle for each period of service.)</p> <p><input checked="" type="checkbox"/> Vietnam Conflict (Since Aug. 1964) <input type="radio"/> <input checked="" type="checkbox"/> Korean War (June 1950 to Jan. 1955) <input type="radio"/> <input checked="" type="checkbox"/> World War II (Sept. 1940 to July 1947) <input type="radio"/> <input checked="" type="checkbox"/> World War I (April 1917 to Nov. 1918) <input type="radio"/> <input checked="" type="checkbox"/> Any other time <input type="radio"/></p>	Month	Year	Month	Year	1	2	3	4	5	6	7	8	<input type="radio"/>							
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5 percent

27a. Has this person ever completed a vocational training program?

For example, in high school; as apprentice; in school of business, nursing, or trades; technical institute; or Armed Forces schools.

Yes No — Skip to 28

b. What was his main field of vocational training? Fill one circle.

- Business, office work
- Nursing, other health fields
- Trades and crafts (mechanic, electrician, beautician, etc.)
- Engineering or science technician; draftsman
- Agriculture or home economics
- Other field—Specify

28a. Does this person have a health or physical condition which limits the kind or amount of work he can do at a job?

If 65 years old or over, skip to question 29.

Yes
 No

b. Does his health or physical condition keep him from holding any job at all?

Yes
 No

c. If "Yes" in a or b— How long has he been limited in his ability to work?

<input type="radio"/> Less than 6 months	<input type="radio"/> 3 to 4 years
<input type="radio"/> 6 to 11 months	<input type="radio"/> 5 to 9 years
<input type="radio"/> 1 to 2 years	<input type="radio"/> 10 years or more

QUESTIONS 29 THROUGH 41 ARE FOR ALL PERSONS BORN BEFORE APRIL 1956 INCLUDING HOUSEWIVES, STUDENTS, OR DISABLED PERSONS AS WELL AS PART-TIME OR FULL-TIME WORKERS

29a. Did this person work at any time last week?

Yes—Fill this circle if this person did full- or part-time work.
(Count part-time work such as a Saturday job, delivering papers, or helping without pay in a family business or farm; and active duty in the Armed Forces)

Skip to 30

No—Fill this circle if this person did not work, or did only own housework, school work, or volunteer work.

b. How many hours did he work last week (at all jobs)?

Subtract any time off and add overtime or extra hours worked.

- 1 to 14 hours 40 hours
- 15 to 29 hours 41 to 48 hours
- 30 to 34 hours 49 to 59 hours
- 35 to 39 hours 60 hours or more

c. Where did he work last week?

If he worked in more than one place, print where he worked most last week.

If he travels about in his work or if the place does not have a numbered address, see instruction sheet.

(1) Address (Number and street name) _____

(2) Name of city, town, village, etc. _____

(3) Inside the limits of this city, town, village, etc.? _____

Yes

No

(4) County _____

(5) State _____ (6) ZIP Code _____

d. How did he get to work last week? Fill one circle for chief means used on the last day he worked at the address given in 29c.

<input type="radio"/> Driver, private auto	<input type="radio"/> Taxicab
<input type="radio"/> Passenger, private auto	<input type="radio"/> Walked only
<input type="radio"/> Bus or streetcar	<input type="radio"/> Worked at home
<input type="radio"/> Subway or elevated	<input type="radio"/> Other means—Specify <input checked="" type="checkbox"/>
<input type="radio"/> Railroad	

After completing question 29d, skip to question 33.

30. Does this person have a job or business from which he was temporarily absent or on layoff last week?

- Yes, on layoff
- Yes, on vacation, temporary illness, labor dispute, etc.
- No

31a. Has he been looking for work during the past 4 weeks?

Yes No—Skip to 32

b. Was there any reason why he could not take a job last week?

- Yes, already has a job
- Yes, because of this person's temporary illness
- Yes, for other reasons (in school, etc.)
- No, could have taken a job

32. When did he last work at all, even for a few days?

<input type="radio"/> In 1970	<input type="radio"/> 1964 to 1967	<input type="radio"/> 1959 or earlier	<input checked="" type="checkbox"/> Skip to 36
<input type="radio"/> In 1969	<input type="radio"/> 1960 to 1963	<input type="radio"/> Never worked	<input type="checkbox"/>
<input type="radio"/> In 1968			

15 percent

15 and 5 percent

— continued —

<p>33-35. Current or most recent job activity <i>Describe clearly this person's chief job activity or business last week, if any. If he had more than one job, describe the one at which he worked the most hours.</i> <i>If this person had no job or business last week, give information for last job or business since 1960.</i></p>		<p>37. In April 1965, was this person— (Fill three circles)</p> <p>a. Working at a job or business (full or part-time)? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>b. In the Armed Forces? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>c. Attending college? <input type="radio"/> Yes <input checked="" type="radio"/> No</p>
<p>33. Industry</p> <p>a. For whom did he work? If now on active duty in the Armed Forces, print "AF" and skip to question 36.</p> <p>(Name of company, business, organization, or other employer)</p> <p>b. What kind of business or industry was this? <i>Describe activity at location where employed.</i></p> <p>(For example: Junior high school, retail supermarket, dairy farm, TV and radio service, auto assembly plant, road construction)</p> <p>c. Is this mainly— (Fill one circle)</p> <p><input type="radio"/> Manufacturing <input type="radio"/> Retail trade <input type="radio"/> Wholesale trade <input type="radio"/> Other (agriculture, construction, service, government, etc.)</p>		<p>38. If "Yes" for "Working at a job or business" in question 37— <i>Describe this person's chief activity or business in April 1965.</i></p> <p>a. What kind of business or industry was this?</p> <p>b. What kind of work was he doing (occupation)?</p> <p>c. Was he— <i>An employee of a private company or government agency... <input type="radio"/></i> <i>Self-employed or an unpaid family worker <input type="radio"/></i></p>
<p>34. Occupation</p> <p>a. What kind of work was he doing?</p> <p>(For example: TV repairman, sewing machine operator, spray painter, civil engineer, farm operator, farm hand, junior high English teacher)</p> <p>b. What were his most important activities or duties?</p> <p>(For example: Types, keeps account books, files, sells cars, operates printing press, cleans buildings, finishes concrete)</p> <p>c. What was his job title?</p>		<p>39a. Last year (1969), did this person work at all, even for a few days? <input type="radio"/> Yes <input checked="" type="radio"/> No — Skip to 41</p> <p>b. How many weeks did he work in 1969, either full-time or part-time? <i>Count paid vacation, paid sick leave, and military service.</i></p> <p><input type="radio"/> 13 weeks or less <input checked="" type="radio"/> 40 to 47 weeks <input type="radio"/> 14 to 26 weeks <input type="radio"/> 48 to 49 weeks <input type="radio"/> 27 to 39 weeks <input type="radio"/> 50 to 52 weeks</p>
<p>35. Was this person— (Fill one circle)</p> <p>Employee of <u>private</u> company, business, or individual, for wages, salary, or commissions... <input type="radio"/> <u>Federal</u> government employee <input type="radio"/> <u>State</u> government employee..... <input type="radio"/> <u>Local</u> government employee (city, county, etc.)... <input type="radio"/> <u>Self-employed</u> in own business, professional practice, or farm— <input checked="" type="radio"/> Own business not incorporated <input type="radio"/> Own business incorporated <input type="radio"/> Working without pay in family business or farm <input type="radio"/></p>		<p>40. Earnings in 1969— Fill parts a, b, and c for everyone who worked any time in 1969 even if he had no income. <i>(If exact amount is not known, give best estimate.)</i></p> <p>a. How much did this person earn in 1969 in wages, salary, commissions, bonuses, or tips from all jobs? \$ _____ .00 <i>(Dollars only)</i> OR <input type="radio"/> None</p> <p>b. How much did he earn in 1969 from his own nonfarm business, professional practice, or partnership? \$ _____ .00 <i>(Dollars only)</i> OR <input type="radio"/> None <i>(Net after business expenses. If business lost money, write "Loss" above amount.)</i></p> <p>c. How much did he earn in 1969 from his own farm? \$ _____ .00 <i>(Net after operating expenses. Include earnings as a tenant farmer or sharecropper. If farm lost money, write "Loss" above amount.)</i> OR <input type="radio"/> None</p>
<p>36. In April 1965, what State did this person live in?</p> <p><input type="radio"/> This State OR (Name of State or foreign country, or Puerto Rico, etc.)</p>		<p>41. Income other than earnings in 1969— Fill parts a, b, and c. <i>(If exact amount is not known, give best estimate.)</i></p> <p>a. How much did this person receive in 1969 from Social Security or Railroad Retirement? \$ _____ .00 <i>(Dollars only)</i> OR <input type="radio"/> None</p> <p>b. How much did he receive in 1969 from public assistance or welfare payments? \$ _____ .00 <i>Include aid for dependent children, old age assistance, general assistance, aid to the blind or totally disabled.</i> <i>Exclude separate payments for hospital or other medical care.</i> OR <input type="radio"/> None</p> <p>c. How much did he receive in 1969 from all other sources? \$ _____ .00 <i>Include interest, dividends, veterans' payments, pensions, and other regular payments.</i> <i>(See instruction sheet.)</i> OR <input type="radio"/> None</p>

15 and 5 percent

5 percent

15 and 5 percent

15 and 5 percent

5 percent

Please answer questions
10, 11, and 12 at the
bottom of page 2.

80, 15, and 5 percent (100 percent)

Page 3

A. How many living quarters, occupied and vacant, are at this address?

- One
- 2 apartments or living quarters
- 3 apartments or living quarters
- 4 apartments or living quarters
- 5 apartments or living quarters
- 6 apartments or living quarters
- 7 apartments or living quarters
- 8 apartments or living quarters
- 9 apartments or living quarters
- 10 or more apartments or living quarters
- This is a mobile home or trailer

Answer these questions for your living quarters

H1. Is there a telephone on which people in your living quarters can be called?

- Yes → What is _____
- No the number? _____

Phone number

H2. Do you enter your living quarters—

- Directly from the outside or through a common or public hall?
- Through someone else's living quarters?

H3. Do you have complete kitchen facilities?

Complete kitchen facilities are a sink with piped water, a range or cook stove, and a refrigerator.

- Yes, for this household only
- Yes, but also used by another household
- No complete kitchen facilities for this household

H4. How many rooms do you have in your living quarters?

Do not count bathrooms, porches, balconies, foyers, halls, or half-rooms.

- 1 room 6 rooms
- 2 rooms 7 rooms
- 3 rooms 8 rooms
- 4 rooms 9 rooms or more
- 5 rooms

H5. Is there hot and cold piped water in this building?

- Yes, hot and cold piped water in this building
- No, only cold piped water in this building
- No piped water in this building

H6. Do you have a flush toilet?

- Yes, for this household only
- Yes, but also used by another household
- No flush toilet

H7. Do you have a bathtub or shower?

- Yes, for this household only
- Yes, but also used by another household
- No bathtub or shower

H8. Is there a basement in this building?

- Yes
- No, built on a concrete slab
- No, built in another way (include mobile homes and trailers)

H9. Are your living quarters—

- Owned or being bought by you or by someone else in this household? Do not include cooperatives and condominiums here.
- A cooperative or condominium which is owned or being bought by you or by someone else in this household?
- Rented for cash rent?
- Occupied without payment of cash rent?

H10a. Is this building a one-family house?

- Yes, a one-family house
- No, a building for 2 or more families or a mobile home or trailer

b. If "Yes"— Is this house on a place of 10 acres or more, or is any part of this property used as a commercial establishment or medical office?

- Yes, 10 acres or more
- Yes, commercial establishment or medical office
- No, none of the above

H11. If you live in a one-family house which you own or are buying—

What is the value of this property; that is, how much do you think this property (house and lot) would sell for if it were for sale?

- Less than \$5,000
- \$5,000 to \$7,499
- \$7,500 to \$9,999
- \$10,000 to \$12,499
- \$12,500 to \$14,999
- \$15,000 to \$17,499
- \$17,500 to \$19,999
- \$20,000 to \$24,999
- \$25,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 or more

If this house is on a place of 10 acres or more, or if any part of this property is used as a commercial establishment or medical office, do not answer this question.

H12. Answer this question if you pay rent for your living quarters.

a. If rent is paid by the month—

What is the monthly rent?

Write amount here → \$ _____ .00 (Nearest dollar)

and

Fill one circle

- Less than \$30
- \$30 to \$39
- \$40 to \$49
- \$50 to \$59
- \$60 to \$69
- \$70 to \$79
- \$80 to \$89
- \$90 to \$99
- \$100 to \$119
- \$120 to \$149
- \$150 to \$199
- \$200 to \$249
- \$250 to \$299
- \$300 or more

b. If rent is not paid by the month—

What is the rent, and what period of time does it cover?

\$ _____ .00 per

(Nearest dollar) (Week, half-month, year, etc.)

FOR CENSUS
ENUMERATOR'S USE
ONLY

<u>a4.</u> Block number	<u>a5.</u> Serial number
-------------------------	--------------------------

0	0	0	0	0	0	0	0
1	0	0	0	1	0	0	0
2	0	0	0	2	0	0	0
3	0	0	0	3	0	0	0
4	0	0	0	4	0	0	0
5	0	0	0	5	0	0	0
6	0	0	0	6	0	0	0
7	0	0	0	7	0	0	0
8	0	0	0	8	0	0	0
9	0	0	0	9	0	0	0

Make no mark in this margin

B. Type of unit or quarters

Occupied

- First form
- Continuation

Vacant

- Regular
- Usual residence elsewhere

Group quarters

- First form
- Continuation

For a vacant unit, also fill C, D, A, H2 to H8, and H10 to H12

C. Vacancy status

Year round

- For rent
- For sale only
- Rented or sold, not occupied
- Held for occasional use
- Other vacant
- Seasonal
- Migratory

Make no mark in this margin

D. Months vacant

- Less than 1 month
- 1 up to 2 months
- 2 up to 6 months
- 6 up to 12 months
- 1 year up to 2 years
- 2 years or more

C/O

H13. Answer question H13 if you pay rent for your living quarters.

In addition to the rent entered in H12, do you also pay for—

a. Electricity?

Yes, average monthly cost is → \$.00
 No, included in rent Average monthly cost
 No, electricity not used

b. Gas?

Yes, average monthly cost is → \$.00
 No, included in rent Average monthly cost
 No, gas not used

c. Water?

Yes, yearly cost is → \$.00
 No, included in rent or no charge Yearly cost

d. Oil, coal, kerosene, wood, etc.?

Yes, yearly cost is → \$.00
 No, included in rent
 No, these fuels not used

H14. How are your living quarters heated?

Fill one circle for the kind of heat you use most.

Steam or hot water system
 Central warm air furnace with ducts to the individual rooms, or central heat pump
 Built-in electric units (*permanently installed in wall, ceiling, or baseboard*)
 Floor, wall, or pipeless furnace
 Room heaters with flue or vent, burning gas, oil, or kerosene
 Room heaters without flue or vent, burning gas, oil, or kerosene (*not portable*)
 Fireplaces, stoves, or portable room heaters of any kind
 In some other way—*Describe* → _____
 None, unit has no heating equipment

H15. About when was this building originally built? *Mark when the building was first constructed, not when it was remodeled, added to, or converted.*

1969 or 1970 1950 to 1959
 1965 to 1968 1940 to 1949
 1960 to 1964 1939 or earlier

H16. Which best describes this building?

Include all apartments, flats, etc., even if vacant.

A one-family house detached from any other house
 A one-family house attached to one or more houses
 A building for 2 families
 A building for 3 or 4 families
 A building for 5 to 9 families
 A building for 10 to 19 families •
 A building for 20 to 49 families
 A building for 50 or more families
 A mobile home or trailer
 Other—
Describe → _____

H17. Is this building—

On a city or suburban lot?—*Skip to H19*
 On a place of less than 10 acres?
 On a place of 10 acres or more?

H18. Last year, 1969, did sales of crops, livestock, and other farm products from this place amount to—

Less than \$50 (or None) \$2,500 to \$4,999
 \$50 to \$249 \$5,000 to \$9,999
 \$250 to \$2,499 \$10,000 or more

H19. Do you get water from—

A public system (*city water department, etc.*) or private company?
 An individual well?
 Some other source (*a spring, creek, river, cistern, etc.*)?

H20. Is this building connected to a public sewer?

Yes, connected to public sewer
 No, connected to septic tank or cesspool
 No, use other means

H21. How many bathrooms do you have?

A complete bathroom is a room with flush toilet, bathtub or shower, and wash basin with piped water.

A half bathroom has at least a flush toilet or bathtub or shower, but does not have all the facilities for a complete bathroom.

No bathroom, or only a half bathroom
 1 complete bathroom
 1 complete bathroom, plus half bath(s)
 2 complete bathrooms
 2 complete bathrooms, plus half bath(s)
 3 or more complete bathrooms

H22. Do you have air-conditioning?

Yes, 1 individual room unit
 Yes, 2 or more individual room units
 Yes, a central air-conditioning system
 No

H23. How many passenger automobiles are owned or regularly used by members of your household?*Count company cars kept at home.*

None
 1 automobile
 2 automobiles
 3 automobiles or more

The 15-percent form contains the questions shown on page 4. The 5-percent form contains the questions shown in the first column of page 4 and the questions on page 5.

15 percent

The 15-percent form contains the questions shown on page 4. The 5-percent form contains the questions shown in the first column of page 4 and the questions on page 5.

H24a. How many stories (floors) are in this building?																				
<input type="radio"/> 1 to 3 stories <input type="radio"/> 4 to 6 stories <input checked="" type="radio"/> 7 to 12 stories <input type="radio"/> 13 stories or more																				
b. If 4 or more stories— Is there a passenger elevator in this building?																				
<input type="radio"/> Yes <input type="radio"/> No																				
H25a. Which fuel is used most for cooking?																				
<table> <tr> <td rowspan="2">Gas</td> <td>From underground pipes serving the neighborhood.</td> <td><input type="radio"/></td> <td>Coal or coke</td> <td><input type="radio"/></td> </tr> <tr> <td>Bottled, tank, or LP</td> <td><input type="radio"/></td> <td>Wood</td> <td><input type="radio"/></td> </tr> <tr> <td>Electricity</td> <td>.....</td> <td><input type="radio"/></td> <td>Other fuel ..</td> <td><input type="radio"/></td> </tr> <tr> <td>Fuel oil, kerosene, etc.</td> <td>.....</td> <td><input type="radio"/></td> <td>No fuel used</td> <td><input type="radio"/></td> </tr> </table>		Gas	From underground pipes serving the neighborhood.	<input type="radio"/>	Coal or coke	<input type="radio"/>	Bottled, tank, or LP	<input type="radio"/>	Wood	<input type="radio"/>	Electricity	<input type="radio"/>	Other fuel ..	<input type="radio"/>	Fuel oil, kerosene, etc.	<input type="radio"/>	No fuel used	<input type="radio"/>
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b. Which fuel is used most for house heating?																				
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c. Which fuel is used most for water heating?																				
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Fuel oil, kerosene, etc.	<input type="radio"/>	No fuel used	<input type="radio"/>																
H26. How many bedrooms do you have?																				
<i>Count rooms used mainly for sleeping even if used also for other purposes.</i>																				
<input type="radio"/> No bedroom <input type="radio"/> 3 bedrooms <input type="radio"/> 1 bedroom <input checked="" type="radio"/> 4 bedrooms <input type="radio"/> 2 bedrooms <input type="radio"/> 5 bedrooms or more																				
H27a. Do you have a clothes washing machine?																				
<input type="radio"/> Yes, automatic or semi-automatic <input type="radio"/> Yes, wringer or separate spinner <input type="radio"/> No																				
b. Do you have a clothes dryer?																				
<input type="radio"/> Yes, electrically heated <input type="radio"/> Yes, gas heated <input type="radio"/> No																				
c. Do you have a dishwasher (built-in or portable)?																				
<input type="radio"/> Yes <input type="radio"/> No																				
d. Do you have a home food freezer which is separate from your refrigerator?																				
<input type="radio"/> Yes <input type="radio"/> No																				
H28a. Do you have a television set? Count only sets in working order.																				
<input type="radio"/> Yes, one set <input type="radio"/> Yes, two or more sets <input type="radio"/> No																				
b. If "Yes"— Is any set equipped to receive UHF broadcasts, that is, channels 14 to 83?																				
<input type="radio"/> Yes <input type="radio"/> No																				
H29. Do you have a battery-operated radio?																				
<i>Count car radios, transistors, and other battery-operated sets in working order or needing only a new battery for operation.</i>																				
<input type="radio"/> Yes, one or more <input type="radio"/> No																				
H30. Do you (or any member of your household) own a second home or other living quarters which you occupy sometime during the year?																				
<input type="radio"/> Yes <input type="radio"/> No																				

5
percent